PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004										\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Application or Docket Number			
CLAIMS AS FILED - PA						T I (Column 2)			SMALL EI	VTITY	0	OTHE R SMALL	R THAN ENTITY	
U.	S. NATIONA	L STAGE FEES	$\top$				,	7	RATE	FEE	7	RATE	FEE	
ВА	SIC FEE		SI	SMALL ENT. = \$ 150			RGE ENT. = \$ 300	1	BASIC FEE	+	<b>-</b> 10	R BASIC FEE	12/	
EX	AMINATION F	FEE		Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			other situations = \$ 100 / \$ 200	1	EXAM. FEE	<del> </del>	1	EXAM. FEE	26	
SE	ARCH FEE		U.S.	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400			other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	1-,-	
FEI	E FOR EXTRA	SPEC. PGS.		minus 100 =			/ 50 =	1	X \$ 125 =	1 :	7	X \$ 250 =	1-1-	
то	TAL CHARGE	ABLE CLAIMS	18	minus 20 =				1	X \$ 25 =	1	OF	X \$ 50 =	1	
IND	EPENDENT C	LAIMS	17	minus 3 =					X \$ 100 =	1	OF	X \$ 200 =	1-	
VUI	LTIPLE DEPE	NDENT CLAIM PR	RESENT	ESENT					+ \$ 180 =	1	OR	+ \$ 360 =	1.	
If the difference in column 1 is less than zero, enter "0" in column 2								1	TOTAL		OR	TOTAL	<del> </del>	
MTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT			(Colum HIGHE NUMB PREVIOU PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA		SMALL I	ADDI- TIONAL FEE	OR	OTHER SMALL I RATE		
AMENDMENT	Total	*	Minus		**		=		X \$ 25 =		OR	X \$ 50 =		
AME	Independent	•	Minus		***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT					_AIM			+ \$ 180 =		OR	+ \$ 360 =		
									TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			(Column	ı 2)	(Column 3)	_						
0 2		CLAIMS REMAINING AFTER AMENDMENT			HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
CINCINCINCINC CO.	Total	•	Minus		44		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	•.	Minus		***		<b>=</b> ·		X \$ 100 =		OR	X \$ 200 =	•	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL					AIM			+ \$ 180 =		OR	+ \$ 360 =		
			<del>_</del>					٦	OTAL ADDIT. FEE		OR	TOTAL ADDIT.		
• H	the "Highest Nur	rmn 1 is less than the mber Previously Paid mber Previously Paid	For" IN	THIS SPA	CE is less th	an 20	, enter "20".						·	

FORM PTO-875 (Rev. 02/2005)

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